

# Key inspection report

## Care homes for older people

<b>Name:</b>	Holme House
<b>Address:</b>	Oxford Road Gomersal Cleckheaton West Yorkshire BD19 4LA

<b>The quality rating for this care home is:</b>	two star good service
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A quality rating is our assessment of how well a care home is meeting the needs of the people who use it. We give a quality rating following a full review of the service. We call this full review a 'key' inspection.

<b>Lead inspector:</b>	<b>Date:</b>
Liz Cuddington	2   7   0   4   2   0   1   0

This is a review of quality of outcomes that people experience in this care home. We believe high quality care should

- Be safe
- Have the right outcomes, including clinical outcomes
- Be a good experience for the people that use it
- Help prevent illness, and promote healthy, independent living
- Be available to those who need it when they need it.

The first part of the review gives the overall quality rating for the care home:

- 3 stars - excellent
- 2 stars - good
- 1 star - adequate
- 0 star - poor

There is also a bar chart that gives a quick way of seeing the quality of care that the home provides under key areas that matter to people.

There is a summary of what we think this service does well, what they have improved on and, where it applies, what they need to do better. We use the national minimum standards to describe the outcomes that people should experience. National minimum standards are written by the Department of Health for each type of care service.

After the summary there is more detail about our findings. The following table explains what you will see under each outcome area.

**Outcome area (for example Choice of home)**

**These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:**

This box tells you the outcomes that we will always inspect against when we do a key inspection.

This box tells you any additional outcomes that we may inspect against when we do a key inspection.

**This is what people staying in this care home experience:**

Judgement:

This box tells you our opinion of what we have looked at in this outcome area. We will say whether it is excellent, good, adequate or poor.

Evidence:

This box describes the information we used to come to our judgement.

We review the quality of the service against outcomes from the National Minimum Standards (NMS). Those standards are written by the Department of Health for each type of care service.

Copies of the National Minimum Standards – Care Homes for Older People can be found at [www.dh.gov.uk](http://www.dh.gov.uk) or bought from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering from the Stationery Office is also available: [www.tso.co.uk/bookshop](http://www.tso.co.uk/bookshop)

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- Regulating health and adult social care services to ensure quality and safety standards, drive improvement and stamp out bad practice
- Protecting the rights of people who use services, particularly the most vulnerable and those detained under the Mental Health Act 1983
- Providing accessible, trustworthy information on the quality of care and services so people can make better decisions about their care and so that commissioners and providers of services can improve services.
- Providing independent public accountability on how commissioners and providers of services are improving the quality of care and providing value for money.

## Reader Information

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## Information about the care home

Name of care home:	Holme House
Address:	Oxford Road Gomersal Cleckheaton West Yorkshire BD19 4LA
Telephone number:	01274862021
Fax number:	01274871702
Email address:	
Provider web address:	

Name of registered provider(s):	Milelands Ltd
Name of registered manager (if applicable)	
Type of registration:	care home
Number of places registered:	68

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
dementia	14	0
old age, not falling within any other category	0	68

### Additional conditions:

The maximum number of service users who can be accommodated is: 68

The registered person may provide the following category of service only: Care home with Nursing - Code N, to service users of the following gender: either, whose primary care needs on admission to the care home are within the following categories: Old age, not falling within any other category- Code: OP 68, Dementia- Code DE 14

Date of last inspection

### Brief description of the care home

Holme House is a care home registered to provide personal care and accommodation for up to forty older men and women. It is situated in the Gomersal area of Kirklees fairly close to Birkenshaw, Birstall and the M62.

### Brief description of the care home

Holme House is a purpose-built building. The facilities include large bathrooms with modern equipment to support people with physical disabilities, en suite bedrooms with TV and DVD players and good quality bedroom furniture. There are spacious lounges and small areas for private use and there are small kitchen areas in the lounges.

There is a pleasant patio area that is used by the people living at the home. There is a main office with offices for staff and for private consultations if required. There are movement sensor lights on corridors and bathrooms. Information about the home and the latest Commission inspection reports are available from the home.

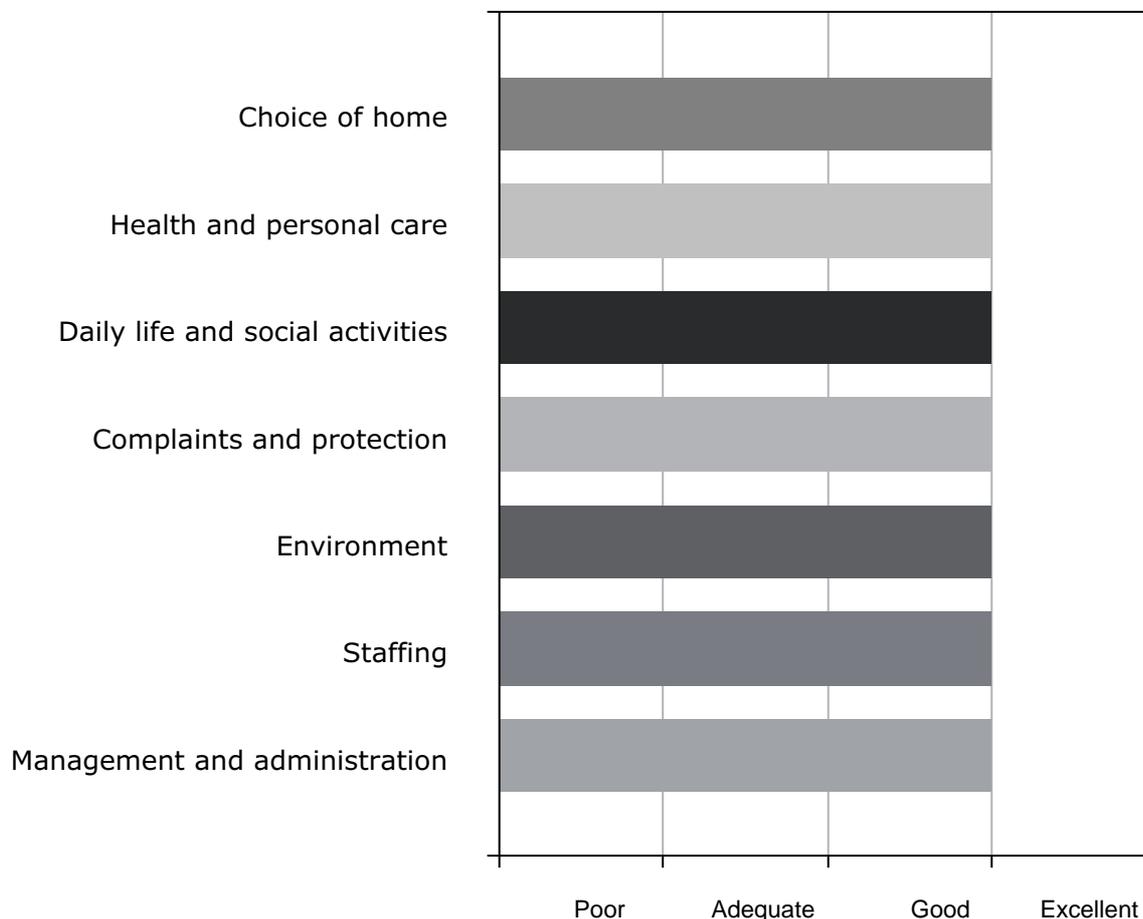
## Summary

This is an overview of what we found during the inspection.

The quality rating for this care home is:

two star good service

### Our judgement for each outcome:



### How we did our inspection:

The quality rating for this service is two stars. This means the people who use this service experience good quality outcomes.

We have reviewed our practice when making requirements, to improve national consistency. Some requirements from previous inspection reports may have been deleted or carried forward into this report as recommendations, but only when it is considered that people who use services are not being put at significant risk of harm. In future, if a requirement is repeated, it is likely that enforcement action will be taken.

The weekly fees the home charges are four hundred and forty pounds and thirty-six pence for residential care and four hundred and fifty-seven pounds and thirty pence, plus the Primary Care Trust contribution, for nursing care.

The purpose of this inspection was to assess the quality of the care and support

received by the people who live at Holme House. The visit to the home was carried out over one day by one inspector.

The methods used to gather information included conversations with the people living at the home, their relatives and the staff as well as looking at care plans and examining other records.

We received the home's self-assessment questionnaire before the inspection visit. This gave us a lot of useful information about the home and helped us plan the visit.

## What the care home does well:

The home is well managed and run in the best interests of the people who live there. There is a very welcoming atmosphere and visitors were arriving throughout the day.

The people who live at Holme House said they are very happy. People said they enjoy living there and said the staff do what people want in the way each individual prefers.

Since our last visit, the service has moved into a new, purpose built home at the rear of the original house. All the rooms are spacious and light and the bedrooms all have en suite facilities.

One person said they are very happy with the care and support they receive and the staff are excellent. The relatives we spoke with also said they are very pleased with the care and support their family member receive from all the staff.

People who live at the home said they are looked after well by the staff, they like it there and are happy and settled.

The pre-admission assessments are thorough and make sure the home can meet people's needs.

The staff understand the needs and preferences of all the people who live at the home. People's health is looked after and the staff have the skills and experience they need to do this.

Everyone said that staff listen to them, and act on what they say. Visitors said they are always welcomed.

On the afternoon of our visit, the staff on the residential floor organised a board game, which people enjoyed. Other people were enjoying a manicure and a group of people who live at Holme House and their relatives were enjoying a lively game of musical bingo.

Other activities and outings are also arranged, as well as activities in the home such as cinema evenings and artwork, led by a visiting artist.

People said they like the meals. The chef is knowledgeable about people's particular likes and dislikes and makes every effort to give people the foods they will enjoy.

There is good and friendly interaction between the people who live at the home and the staff. There were enough staff on duty to make sure they have time to spend with people in conversation as well as supporting people to take part in individual and group activities.

All the staff said they enjoy working at Holme House and felt they were well supported by their manager. They all said the training is good and helps them to do their job well.

At the time we visited, twenty-one of the care staff had achieved a National Vocational Qualification (NVQ) in care at level 2 or 3 and ten staff had almost completed the level

2 award.

The complaints and adult protection systems work well and people said they feel safe and understand what to do if they have a concern.

The home is very attractive and well planned. It is clean and well maintained and everyone we spoke to said the home is always kept fresh and clean.

### **What has improved since the last inspection?**

The assessment procedures that the home follows, to make sure they only offer a service to people whose needs they can meet, have been improved. At present the new manager is carrying out all the pre-admission assessments.

All of the medicines we checked were accurate, and staff had signed the medicines administration record charts on every occasion that a dose of medicine was offered. This confirms that staff are now following the correct medicines administration procedures.

The adult protection procedures have been improved, to make sure that people are kept safe.

### **What they could do better:**

The care and support plans need to show that, where possible, the individuals and their families are involved in developing and reviewing their plans.

If the person, or their relatives, are willing to disclose information about themselves a life history, or information about their interests, can give staff a basis for understanding the individual better and help them to provide more person centred care. This is something the new manager said she is working on at present.

Although there were enough staff on the upstairs, nursing part of the home, there was very little activity in the afternoon. If people do not want to be very active, quiet pastimes such as newspaper reading and board games could be enjoyed by most people. One relative also said that there is often not enough activity on the nursing part of the home to stimulate people's interests.

The organisation should landscape the steep banks around the gardens, to make them more attractive for the people who live at the home.

If you want to know what action the person responsible for this care home is taking following this report, you can contact them using the details on page 4.

The report of this inspection is available from our website [www.cqc.org.uk](http://www.cqc.org.uk). You can get printed copies from [enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk) or by telephoning our order line 0870 240 7535.

## Details of our findings

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## Choice of home

**These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:**

People are confident that the care home can support them. This is because there is an accurate assessment of their needs that they, or people close to them, have been involved in. This tells the home all about them and the support they need. People who stay at the home only for intermediate care, have a clear assessment that includes a plan on what they hope for and want to achieve when they return home.

People can decide whether the care home can meet their support and accommodation needs. This is because they, or people close to them, have been able to visit the home and have got full, clear, accurate and up to date information about the home. If they decide to stay in the home they know about their rights and responsibilities because there is an easy to understand contract or statement of terms and conditions between them and the care home that includes how much they will pay and what the home provides for the money.

**This is what people staying in this care home experience:**

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

People are assessed before they are admitted to the home, to make sure their needs can be met.

Evidence:

People said that they were given enough information about the home before deciding to move in. The Service Users' Guide has recently been updated, to make sure people have the most recent information about the home.

Where possible the home encourages people and their families to visit the home and talk to the people who already live at the home, their relatives and the staff. The home invites them to come and spend time at the home, share a meal and maybe take part in the day's activities. This means that the home can get to know the person's needs and the individual has the information he or she needs to make a decision.

Evidence:

Before moving into Holme House, the manager visits people to assess their needs, to make sure that the home is able to meet their needs. This assessment, as well as Social Services' needs assessments when available, forms the basis for the individual plan of care and support.

## Health and personal care

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People's health, personal and social care needs are met. The home has a plan of care that the person, or someone close to them, has been involved in making. If they take medicine, they manage it themselves if they can. If they cannot manage their medicine, the care home supports them with it, in a safe way. People's right to privacy is respected and the support they get from staff is given in a way that maintains their dignity.

If people are approaching the end of their life, the care home will respect their choices and help them feel comfortable and secure. They, and people close to them, are reassured that their death will be handled with sensitivity, dignity and respect, and take account of their spiritual and cultural wishes.

**This is what people staying in this care home experience:**

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

People's personal and healthcare needs are met and people are protected by the medication administration systems.

Staff treat people with respect, care and consideration at all times.

Evidence:

From observation and discussions with staff and people living at the home, it was clear that the staff are aware of each person's needs and preferences. The staff make sure they provide the help people need in the way they prefer.

The care and support plans we looked at also showed that people's health and personal care needs are being met in the way each person prefers. The plans cover every area of the individual's care needs. They all contain enough information to guide staff in how to care for and support each person.

The manager and staff are currently working on improving the plans, to make them clearer and easier to use.

## Evidence:

The plans include risk assessments and management plans where someone is at risk of falling, developing a pressure sore, becoming malnourished or any other area the staff feel may put the individual at any risk.

Health care visits and treatments are recorded in detail and everyone who commented said they always receive the healthcare they need. We saw evidence to show that, where needed, specialist health care professionals such as the tissue viability nurse, are involved in people's care. On the day we visited, an occupational therapist came to the home to carry out an assessment of someone's needs so that the equipment they need to improve their mobility could be provided.

One person said the care and support they receive is 'excellent' and other people we spoke with, and their relatives, all said they are very happy with the care and support the staff provide.

None of the plans we looked at included a personal history of the individual. If the person, or their relatives, are willing to disclose information about themselves a life history, or information about their interests, can give staff a basis for understanding the individual better and help them to provide more person centred care. This is something the new manager is working on.

The care plans are evaluated every month. The plans need to show that, where possible, the individuals and their families are involved in developing and reviewing their plans.

One member of staff confirmed that the care plans are kept up to date and the staff are always told about any changes to people's health and well-being.

The medicines are kept safe and secure and the Medicines Administration Record (MAR) charts are securely stored. Most of the medicines are supplied by the pharmacy in a monitored dosage system, but some remain in the original packaging. The MAR charts, which must show clearly the quantities of medicines received and in stock for each person, were examined.

The medicines supplied in the monitored dosage system appeared to be recorded accurately. The medicine trolley was locked when it was unattended and the member of staff who administers the medication signs the MAR chart after offering each dose.

We checked some of the medicines that are supplied in their original packaging, to

Evidence:

make sure the numbers that have been signed as administered tallied with the amounts received and the quantities remaining. All of the medicines we checked were accurate, and staff had signed the MAR charts on every occasion that a dose of medicine was offered.

During the visit, all the staff were seen to treat people with respect and maintain their dignity. The people who commented said that they receive the care they need and are supported to maintain their independence for as long as they are able. People's relatives confirmed this. Everyone said the staff listen and act on what they say.

## Daily life and social activities

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

Each person is treated as an individual and the care home is responsive to his or her race, culture, religion, age, disability, gender and sexual orientation. They are part of their local community. The care home supports people to follow personal interests and activities. People are able to keep in touch with family, friends and representatives. They are as independent as they can be, lead their chosen lifestyle and have the opportunity to make the most of their abilities. People have nutritious and attractive meals and snacks, at a time and place to suit them.

There are no additional outcomes.

**This is what people staying in this care home experience:**

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

People are supported to take part in a range of activities.

People are offered a good choice of meals to make sure their dietary needs and preferences are met.

Evidence:

The home employs two activities co-ordinators and the 'residents and relatives' meetings decide on the type of activities that they would like.

Most people said there are sufficient activities but others said they would like more. On the afternoon we were there, the staff on the residential floor organised a board game, which people enjoyed. Other people were having a manicure and a group of people who live at Holme House and their relatives were enjoying a lively game of musical bingo. Some people who live upstairs in the nursing part of the home, enjoy spending time downstairs as well.

Although there were enough staff upstairs, there was very little activity in the afternoon. Even if people do not want to be very active, quiet pastimes such as newspaper reading, playing cards and board games and reminiscence sessions could

## Evidence:

be enjoyed by most people. One relative also said that there is not enough activity on the nursing part of the home to stimulate people's interests.

When we visited the nursing floor, the television was switched on even though nobody was watching it. Some music that people say they enjoy listening to would perhaps be pleasanter.

Trips out are also arranged. Some people attend a weekly coffee morning at the local church and there is also a monthly lunch club that some people enjoy going to. Visits to the local theatre and library are also arranged.

Some people said they would like to go out more and the new manager is keen to encourage staff to support people to go out to places of interest, or even just out for a walk or to the shops.

A 'reminiscence group' comes in regularly, bringing boxes of items to remind people of events and be a focus for discussion. The home has recently started having cinema evenings. Someone from outside the home brings in a large screen and people have popcorn and icecream while watching a film. A therapist comes in to give people hand or foot massages, if they wish and an artist comes to the home to do creative artwork with people.

The chef is knowledgeable about people's particular likes and dislikes and makes every effort to give people the foods they will enjoy. People on special diets, such as diabetics, are well catered for. The diabetic cakes looked very appetising.

The menus are discussed with people and their relatives, so that they can include the foods people particularly enjoy.

Everyone said the food is very nice and they look forward to mealtimes. People told us that if they do not want the choices on the menu the chef will prepare something they can enjoy.

People are offered hot and cold drinks and snacks throughout the day and staff can always make something for people at any time of the day or night. Each lounge/dining room has a kitchen area where staff and people who live at the home can prepare drinks and snacks.

The people who live at Holme House said they can do what they want, when they want. This confirmed our observations that the staff support people to live their life in

Evidence:

the way they choose.

## Complaints and protection

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

If people have concerns with their care, they or people close to them know how to complain. Any concern is looked into and action taken to put things right. The care home safeguards people from abuse and neglect and takes action to follow up any allegations.

People's legal rights are protected, including being able to vote in elections.

**This is what people staying in this care home experience:**

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

People are aware of how to raise a concern or make a complaint if they are dissatisfied with the service.

Staff have received suitable training and understand the adult protection policies and procedures, which makes sure that people at the home are safe.

Evidence:

Any complaints or concerns are recorded in a complaints file. The actions taken and the outcomes are recorded.

Staff said they know what to do if anyone has concerns. The relatives said the home responds appropriately to any concerns. People said they know what to do if they have a concern or complaint and everyone said they felt safe at the home.

The new manager said she prefers to sort out any concerns quickly, before they become bigger issues. Her aim is to get to know the people who live at Holme House and their relatives well, so that they feel confident that they can approach her with any concerns they have.

Newly employed staff are made aware of the home's 'whistle blowing' policies and procedures, to be used if they suspect abuse or see examples of poor practice. All of the staff have had adult protection training and all the appropriate policies and

Evidence:

procedures are in place to guide staff. The adult protection procedures have been improved, to make sure that people are kept safe.

One safeguarding referral has been made to Kirklees Social Services' adult protection staff during the last twelve months. This has been resolved satisfactorily.

One complaint is still under investigation, but this is not about the care and support people receive from the staff at Holme House.

## Environment

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People stay in a safe and well-maintained home that is homely, clean, pleasant and hygienic.

People stay in a home that has enough space and facilities for them to lead the life they choose and to meet their needs. The home makes sure they have the right specialist equipment that encourages and promotes their independence. Their room feels like their own, it is comfortable and they feel safe when they use it.

**This is what people staying in this care home experience:**

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The home provides a well planned, comfortable and well-maintained environment.

Evidence:

Since our last visit, the service has moved into a new, purpose built home at the rear of the original house. All the rooms are spacious and light and the bedrooms all have en suite facilities.

The home is clean, attractively decorated and well maintained and everyone we spoke to said the home is always kept fresh and clean.

The house is in two parts; the ground floor offers residential care and support and the first floor also offers nursing care.

Staff are employed to help look after the maintenance of the house and grounds as well as keeping the gardens tidy. People said they enjoy sitting outside in the new courtyard garden which has plenty of seating and tables for people to use.

There is quite steep banking around the house which the organisation needs to improve with planting to make it more attractive. At present it is mostly just earth with a few plants.

Evidence:

The laundry is well equipped, hygienic and efficiently run.

Protective gloves, antiseptic hand rub and aprons are available for staff to use when necessary, to support the home's infection control measures.

## Staffing

**These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:**

People have safe and appropriate support as there are enough competent staff on duty at all times. They have confidence in the staff at the home because checks have been done to make sure that they are suitable to care for them. Their needs are met and they are cared for by staff who get the relevant training and support from their managers.

There are no additional outcomes.

**This is what people staying in this care home experience:**

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

Sufficient staff are employed to meet people's needs and people are protected by thorough recruitment procedures, which ensures that staff are suitable to work with people who live at the home.

Suitable training is provided to make sure staff have the skills and knowledge they require to be able to meet people's needs.

Evidence:

The staff rotas, and people's comments, confirmed our observations that there are enough staff on duty to meet people's care, social and leisure needs. The staff confirmed that staffing levels are adjusted to meet people's needs. Most people said there are always enough staff around and our observations confirmed this, although some people said that sometimes there could be more staff on duty. One person's relative, who visits regularly, said there are always enough staff available at all different times of the day.

All new staff complete an application form and provide two written references. Criminal Records Bureau (CRB) and Protection of Vulnerable Adults (POVA) register checks are obtained and no new staff begin work until these checks have been completed satisfactorily. The staff files we examined were well organised and confirmed that the recruitment procedures are thorough and safe.

## Evidence:

There is plenty of training available for staff. All the staff we spoke with said the training is good and keeps them up to date. The home keeps good records of staff training, which also shows when updates are needed.

The staff have all taken the mandatory health and safety and moving and handling training courses as well as additional, specialist training such as dementia care and continence care.

All new staff complete induction training which meets the Skills for Care criteria. This gives them good basic training to help them do their job effectively, and provides a sound basis for taking a National Vocational Qualification (NVQ) course.

At the time of our visit, twenty-one of the thirty-six care staff had achieved an NVQ in care at level 2 or 3 and ten staff have almost finished the level 2 award. Three staff are currently taking the level 3 award in care. Three of the ancillary staff have also achieved an NVQ award.

## Management and administration

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People have confidence in the care home because it is led and managed appropriately. People control their own money and choose how they spend it. If they or someone close to them cannot manage their money, it is managed by the care home in their best interests. The environment is safe for people and staff because appropriate health and safety practices are carried out.

People get the right support from the care home because the manager runs it appropriately with an open approach that makes them feel valued and respected. The people staying at the home are safeguarded because it follows clear financial and accounting procedures, keeps records appropriately and ensures their staff understand the way things should be done. They get the right care because the staff are supervised and supported by their managers.

**This is what people staying in this care home experience:**

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The home is safe and well managed, in the best interests of the people who live there.

Evidence:

The manager has the necessary experience and qualifications to manage the home, in the best interests of the people who live there. The manager attends training to keep up her professional development.

The people who live at Holme House and the relatives we spoke with all said they felt the home was managed well.

The records and the staff confirmed that all staff have one to one supervision meetings with their line manager. Supervision meetings support staff to plan their personal and professional development and give them the opportunity to discuss any areas of concern in a confidential setting.

The staff said that they are well supported and they work well together as a team. The

Evidence:

staff said they are kept up to date with any changes through written records and verbal communication.

People's personal information is stored securely when it is not being used.

The home's policies and procedures are up to date and provide relevant information to guide staff on how to act in every situation. All the regular health and safety checks for the home are carried out in a timely manner. These measures make sure that the health, safety and welfare of the people at the home is promoted and safeguarded.

The home has a range of quality assurance systems in place, to help determine the quality of service the home offers. These include surveys for the people who live at the home and their relatives, meetings for people who live at the home and their families, staff meetings and regular audit checks.

The home's most recent Environmental Health inspection of the kitchen resulted in them being awarded the maximum of five stars. We spent time talking to the chef on duty and being shown round the kitchen. It is spacious, clean and well equipped and the kitchen staff follow good food hygiene and food safety principles.

At present there are no people living at the home who are subject to a deprivation of their liberty authorisation, under the Mental Capacity Act 2005.

The safeguards and authorisation conditions have been met and, where relevant, people's experience of the care they receive has been reflected in the appropriate part of the report.

Are there any outstanding requirements from the last inspection?

Yes

No

## Outstanding statutory requirements

These are requirements that were set at the previous inspection, but have still not been met. They say what the registered person had to do to meet the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards.

No.	Standard	Regulation	Requirement	Timescale for action

## Requirements and recommendations from this inspection:

### Immediate requirements:

These are immediate requirements that were set on the day we visited this care home. The registered person had to meet these within 48 hours.

No.	Standard	Regulation	Requirement	Timescale for action

### Statutory requirements

These requirements set out what the registered person must do to meet the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards. The registered person(s) must do this within the timescales we have set.

No.	Standard	Regulation	Requirement	Timescale for action
1	7	15	<p>The care and support plans need to show that, where possible, the individuals and their families are involved in developing and reviewing their plans.</p> <p>This is to confirm that the individual, or people representing them, have agreed the plan of care and support.</p>	30/09/2010

### Recommendations

These recommendations are taken from the best practice described in the National Minimum Standards and the registered person(s) should consider them as a way of improving their service.

No	Refer to Standard	Good Practice Recommendations
1	12	If people are willing to disclose information about themselves a life history, or information about their interests, can give staff a basis for understanding the individual better and help them to provide more person centred care.
2	19	The organisation should landscape the steep banks around the gardens, to make them more attractive for the people who live at the home.

## Helpline:

**Telephone:** 03000 616161

**Email:** [enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk)

**Web:** [www.cqc.org.uk](http://www.cqc.org.uk)

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